

SOUTH FLORIDA WATER MANAGEMENT DISTRICT

APPLICATION FOR VARIANCE

Pursuant to Rule 40E-21.275, Florida Administrative Code

Additional information believed to be material may be attached and additional sheets may be used if necessary, for any of the responses.

A. Name: _____

Address: _____

Street

City

State

Zip

Email Address: _____

24 hour contact phone #: (____) _____

Location of Property for which relief is being requested if different from above:

Street City State Zip

Section/Township/Range (if known): _____

SFWMD Permit Number: _____ Project Name: _____

B. Specific rule, order, water shortage phase or restriction from which relief is requested:

C. Facts supporting this request (be as specific as possible – include reports by qualified technical experts):

D. Description of relief requested:

E. Period of time for which variance is sought and the reasons and facts for such:

F. Damage or harm which may result from compliance with the Water Shortage Rule or Order:

G. If restrictions cannot be met because of extent or cost, describe measures necessary to meet all restrictions, restrictions which can be met, and the date of compliance:

H. If this request is for a golf course which is unable to meet the front nine-back nine requirements, submit a map showing the proposed alternative division of the course in half and an explanation of the proposed irrigation scheme.

I. For applications for variance from restrictions on irrigation, provide a general description of the irrigation system, including pump or water system output and irrigated area:

J. Any other information the applicant believes is material:

Applicant's Signature

Print name of Applicant

Date

.....**For District Use Only**.....

Date Received: _____ Date Application Complete: _____ Control No: _____

Compliance: Yes _____ No _____

Form Sent

Received

Approved:

By: _____

Date: _____